			Application or Docket Number									
	PATENT A	D	١,	1000	76	TO LANGE						
Effective October 1, 2001												2
CLAIMS AS FILED PART I								LEI	YTITY		OTHER	
TTC	TAL CLAULC		(Column 1) (Colu			mn 2)	TYPE		3	OR	SMALL	ENTITY
TOTAL CLAIMS								Ε	FEE		RATE	历建
FOR						ER EXTRA	BASIC	FEE	370.00	OR	BASIC FEE	740.80
TOTAL CHARGEABLE CLAIMS			minus 20= *				X\$ 9)=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 = *				X42	=		OR	X84=	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140)=		OR	+280=	,
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTA	NL		OR	TOTAL	1040
CLAIMS AS AMENDED - PART II								,			OTHER	THAN
2-22-08 (Column 1)			(Column 2)			(Column 3)	SMALL			OR	SMALL ENTITY	
AMENDMENTA		CLAIMS REMAINING AFTER		NUM PREVIO	8ER	PRESENT EXTRA	RAT	E	ADDI- TIONAL		RATE	ADDI- TIONAL
		AMENDMENT		PAID					FEE			FEE
	Total	* //	Minus	** 2	0	2	X\$ 9	=		OR	X\$18=	
AME	Independent	• 3	Minus	*** ~	<u>></u>	7	X42	=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN	CLAIM		+140	=		OR	+280=	
	•						10	TAL.			TOTAL	
		(0-1 4)		(O.)	0	(Oak 0)	ADDIT. F	EE			ADDIT. FEE	
		(Column 1) CLAIMS		(Colu	EST	(Column 3)		_	ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER		NUM PREVI		PRESENT EXTRA	RATI	Ε	TIONAL		RATE	TIONAL
		AMENDMENT		PAID	FOR			-	FEE			FEE
	Total	*	Minus	##		=	X\$ 9	=		OR	X\$18=	
	Independent	<u> • </u>	Minus	***			X42:	3		OR	X84=	
L	FIHST PRESE	NTATION OF MI	JLTIPLE DEPENDENT (CLAIM	للل	+140				+280=	
							10			OR	TOTAL	
							ADDIT. F			OR	ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
ပ		CLAIMS REMAINING		HIGH NUM	BER	PRESENT			ADDI-			ADDI-
		AFTER AMENDMENT		PREVI PAID	OUSLY FOR	EXTRA	RATI	-	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT C	Total	•	Minus	**		=	X\$ 9	-		OR	X\$18=	
IME	Independent	*	Minus	***		₽.	X42=			OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\dashv		UT.		
	litha anto in art	ma 4 ia laas Mass 4	o ostala act		a 50° in a-	luma 2	+140			OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa ober Previously Pa						_	ropriate box	c in col	umn 1.	